

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

JAN 03 2007

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent/advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

22922

7590

09/29/2006

REINHART BOERNER VAN DEUREN S.C.
 ATTN: LINDA KASULKE, DOCKET COORDINATOR
 1000 NORTH WATER STREET
 SUITE 2100
 MILWAUKEE, WI 53202

01/04/2007 RHEBRAH1 00000029 180882 10616863

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Peter J. Manghera	(Depositor's name)
<i>Peter J. Manghera</i>	(Signature)
December 28, 2006	(Date)

01 FC:1501 1400.00 DA	02 FC:1501 300.00 DA	03 FC:8001 45.00 DA	10/616,863	07/10/2003	Francesco Cerrina	7151	1476
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TITLE OF INVENTION: DEFECT INSPECTION OF EXTREME ULTRAVIOLET LITHOGRAPHY MASKS AND THE LIKE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	12/29/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
YOUNG, CHRISTOPHER G	1756	430-005000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Reinhart Boerner
 Van Deuren s.c.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Wisconsin Alumni Research
 Foundation

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Madison, Wisconsin

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 15

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

- ☐ A check is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 18-0882 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Peter J. Manghera

Date

December 28, 2006

Typed or printed name

Peter J. Manghera

Registration No.

40,080

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail with sufficient postage addressed to Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on December 28, 2006.
Reinhart Boerner Van Deuren s.c.

PATENT APPLICATION

By:

Peter J. Manghera
Peter J. Manghera

Date: December 28, 2006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

GROUP ART UNIT: 1756

EXAMINER: Christopher G. Young

In re application of:)
Francesco Cerrina.)
)
Application No: 10/616,863)
)
Filed: 07/10/2003)
)
Confirmation No.: 1476)
)
Attorney Docket No. 7151)
)
Customer No. 22922)

For: DEFECT INSPECTION OF
EXTREME ULTRAVIOLET
LITHOGRAPHY MASKS AND
THE LIKE

MAIL STOP ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

December 28, 2006

TRANSMITTAL OF PAYMENT OF ISSUE FEE (37 CFR 1.311)

1. Applicant hereby pays the issue fee for the attached Issue Fee Transmittal PTOL-85.

2. Fee (37 CFR 1.18(a) and (b))

Application status is:

	<u>Regular</u>	<u>Design</u>
<input type="checkbox"/> small business entity- fee	<input type="checkbox"/> \$700.00	<input type="checkbox"/> \$400.00
<input checked="" type="checkbox"/> other than a small entity - fee	<input checked="" type="checkbox"/> \$1,400.00	<input type="checkbox"/> \$800.00
<input checked="" type="checkbox"/> publication fee	<input checked="" type="checkbox"/> \$300.00	

3. Payment of fee

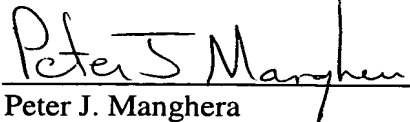
☐ Enclosed please find a check in the sum of \$_____

☐ Charge Account _____ for any fee deficiency.

☒ Charge Account 18-0882 the sum of \$1745.00 for the above issue fee,
publication fee, and fifteen (15) copies of the patent as issued
A duplicate of this request is attached.

Reg. No.: 40,080.

Tel. No.: (608) 229-2298



Peter J. Manghera

Reinhart Boerner Van Deuren s.c.

Attn: Linda Gabriel, Docket Clerk

1000 N. Water Street, Suite 2100

Milwaukee, WI 53202

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<p><i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i></p> <p>FREE TRANSMITTAL for FY 2006</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>		<p>Complete if Known</p>	
<p>TOTAL AMOUNT OF PAYMENT</p>		<p>(\$) 1745.00</p>	
<p>Application Number</p>		<p>10/616,863</p>	
<p>Filing Date</p>		<p>07/10/2003</p>	
<p>First Named Inventor</p>		<p>Francesco Cerrina</p>	
<p>Examiner Name</p>		<p>Christopher G. Young</p>	
<p>Art Unit</p>		<p>1756</p>	
<p>Attorney Docket No.</p>		<p>7151</p>	

METHOD OF PAYMENT (check all that apply)

- ☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) : _____
- ☒ Deposit Account Deposit Account Number: 18-0882 Deposit Account Name: _____
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, **except for the filing fee**
- ☒ Charge any additional fee(s) or underpayments of fee(s) ☐ Credit any overpayments
- Under 37 CFR 1.16 and 1.17
- WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee(\$)	Fee(\$)	Small Entity Fee(\$)	Fee(\$)	Small Entity Fee(\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

<u>Fee Description</u>				<u>Fee (\$)</u>	<u>Fee (\$)</u>
Each claim over 20 (including Reissues)				50	25
Each independent claim over 3 (including Reissues)				200	100
Multiple dependent claims				360	180
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee(\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	
_____ -20 or HP= _____	x _____	= _____	_____	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
HP = highest number of total claims paid for, if greater than 20.				_____	_____
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee(\$)</u>	<u>Fee Paid (\$)</u>		
_____ - 3 or HP= _____	x _____	= _____	_____		
HP = highest number of independent claims paid for, if greater than 3.					

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____ - 100 = _____	/ 50 = _____	(round up to a whole number) x _____	= _____	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge) : Issue Fee (\$1400) Publication Fee (\$300) Patent Copies (\$45)

Fees Paid (\$)
1745.00

SUBMITTED BY

Signature	<i>Peter J. Manghera</i>	Registration No. (Attorney/Agent)	40,080	Telephone	608-229-2228
Name (Print/Type)	Peter J. Manghera			Date	Decembr 28, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.